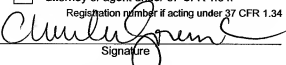


|   |   |  |  |
|---|---|--|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |   | Docket Number (Optional)<br>1247-0541PUS1                  |  |
| Application Number      10/562,552-Conf. #8217  |   | Filed      December 28, 2005                               |  |
| For      DEVELOPER CONTAINER AND IMAGE FORMING APPARATUS  |   |  |  |
| Art Unit      2852  |   | Examiner      G. T. Evans                                  |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |   |  |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |   |  |  |
| <input type="checkbox"/><br><input checked="" type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/>   | One month (37 CFR 1.17(a)(1))<br>Two months (37 CFR 1.17(a)(2))<br>Three months (37 CFR 1.17(a)(3))<br>Four months (37 CFR 1.17(a)(4))<br>Five months (37 CFR 1.17(a)(5)) | <b>Fee</b><br>\$120<br>\$460<br>\$1050<br>\$1640<br>\$2230 | <b>Small Entity Fee</b><br>\$60<br>\$230<br>\$525<br>\$820<br>\$1115 |
| \$ _____<br>\$ 460.00<br>\$ _____<br>\$ _____<br>\$ _____   |   |  |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |   |  |  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |   |  |  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |   |  |  |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |   |  |  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet. |   |  |  |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>   |   |  |  |
| I am the <input type="checkbox"/> applicant/inventor.   |   |  |  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  |   |  |  |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>29,271</u>  |   |  |  |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.   |   |  |  |
| Registration number if acting under 37 CFR 1.34 _____   |   |  |  |
| <br>_____<br>Signature   |   | May 30, 2008<br>_____<br>Date                              |  |
| Charles Gorenstein<br>_____<br>Typed or printed name  |   | (703) 205-8000<br>_____<br>Telephone Number                |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                 |   |  |  |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |   |  |  |